

Entered - 10/01/01 - sb
CL01L0603 - DIANNE C. MITCHELL

01-R-1843

CLAIM OF: IRVING AND HARRIET DANIELS,
through their insurance carrier,
Encompass Insurance
P. O. Box 908
Monmouth Junction, NJ 08852

For damages alleged to have been sustained as a result of a sewer
back up on June 6, 2001 at 1870 Ridge Valley Road.

THIS ADVERSED REPORT IS APPROVED

BY: Rosalind Rubens Newell
ROSALIND RUBENS NEWELL
DEPUTY CITY ATTORNEY

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 01L0603

Date: October 22, 2001

Claimant /Victim IRVING AND HARRIET DANIELS

BY: (Ins. Co.) Encompass Insurance

Address: P. O. Box 908, Monmouth Junction, NJ 08852

Subrogation: X Claim for Property damage \$ 6,892.65 Bodily Injury \$

Date of Notice: 09/19/01 Method: Written, proper X Improper

Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X

Date of Occurrence 06/06/01 Place: 2870 Ridge Valley Road

Department Public Works Division: Sewer Operations

Employee involved Disciplinary Action:

NATURE OF CLAIM: The claimants allege their property was damaged due to a sewer back up. The investigation determined that the City had no notice a any problems with the sewer line prior to the event occurring on June 6, 2001. The City is immune from liability as set forth in O.C.G.A. §36-33-1.

INVESTIGATION:

Statements: City employee Claimant Others Written Oral

Pictures Diagrams Reports: Police Dept Report X Other

Traffic citations issued: City Driver Claimant Driver

Citation disposition: City Driver Claimant Driver

BASIS OF RECOMMENDATION:

Function: Governmental X Ministerial

Improper Notice More than Six Months Other X Damages reasonable

City not involved Offer rejected Compromise settlement

Repair/replacement by Ins. Co. Repair/replacement by City Forces

Claimant Negligent City Negligent Joint Claim Abandoned

Respectfully submitted,


INVESTIGATOR - DIANNE C. MITCHELL

RECOMMENDATION:

Pay \$ Adverse X Account charged: 1A01 2J01 2H01

Claims Manager:  Concur/date 10-22/01

Committee Action: Council Action



Formerly known as CNA Personal Insurance

Subrogation Center, P.O. Box 908, Monmouth Junction, NJ 08852

Mitchell
09/26/01
encompassinsurance.com
DM

Charlene Neal

Subro Claims Rep

Telephone

(732) 398-4139

(800) 260-1454 x4139

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(732) 398-5009

Internet

charlene.neal@encompassins.com

September 10, 2001

COUNCIL of the CITY of ATLANTA
MUNICIPAL CLERK / CITY HALL
55 TRINTY AVENUE S. W.
ATLANTA , GA. 30335

ENTERED - 10-1-01 - SB
01L0603 - DIANNE MITCHELL

RECEIVED

SEP 19 2001

MUNICIPAL CLERK

Our Claim Number: P8145581 BF
Your Reference Number: .
Your Insured: City of Atlanta
Our Insured: Irving & Harriet Daniels
Location of Loss: Atlanta, GA
Date of Loss: 06/06/2001
Insuring Company: Continental Ins Co

Dear Sirs :

This letter is formal notice of our subrogation rights with regards to the above captioned matter. Our investigation indicates that on the above date of loss the city sewer lines backed up into the commodes in my insurers home causing flooding and water damages.

We have enclosed all supporting documentation substantiating our subrogation demand in the amount of \$6,892.65 which includes our insured's 500 deductible. Please include our claim number on your check made payable to Continental Ins Co as subrogee of Irving & Harriet Daniels.

If you should have any questions, please contact the undersigned. Thank you for your cooperation

Sincerely,

Charlene Neal

Enc: File Documentation